

## PUBLIC FACILITIES PROPOSAL

1. Agency Requesting Funding \_\_\_\_\_
2. CDBG Request \$ \_\_\_\_\_
3. Project Title \_\_\_\_\_
4. Project Address \_\_\_\_\_
5. Public Facility Priority ☐ Geographic Areas (indicate target area below) ☐ Citywide

### AGENCY INFORMATION

**LIMIT RESPONSES TO THE SPACE PROVIDED AND ATTACH ADDITIONAL INFORMATION WHERE REQUESTED.**

6. Describe the agency and mission/purpose.
7. Organizational Chart and Board of Directors. Attach both to application and label Attachment to Question 7.
8. Mailing Address:  
Street \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_
9. Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_
10. Year Incorporated \_\_\_\_\_ 501c(3) ☐ Yes ☐ No ☐ Taxpayer Identification No. \_\_\_\_\_
11. Major Sources of Agency Funding (please list)
12. City Council District(s) and Census Tracts to be served *by this project* (refer to map)  
District(s) \_\_\_\_\_  
Census Tract(s) \_\_\_\_\_
13. Agency's Authorized Signee (please print) \_\_\_\_\_
- Signature \_\_\_\_\_ Title \_\_\_\_\_

# PROJECT DESCRIPTION

## LIMIT RESPONSES TO THE SPACE PROVIDED IN THE APPLICATION

**14. PUBLIC FACILITIES PROJECT DESCRIPTION**

Describe the project and list the type of activities that will occur in connection with the project i.e., acquisition, rehabilitation, construction, expansion, demolition, parking repaving, alley abandonment and indicate how the CDBG funds will be used. Be specific.

**15. PUBLIC FACILITIES PROJECT SERVICE PURPOSE**

Describe the services that will be offered at the project and why the project is important to meet this need.

**16. FACILITIES OPERATION**

Describe how the operation of the facility (i.e., staffing, program supplies, and maintenance) is financially supported now and how it will be in future years.

**17. LICENSING**

List any and all licenses required to carry out this project. For example, if the proposed program serves infants, children or youth, indicate if the program requires an Arizona Department of Health Services Childcare license (*see instructions for detail*). Licensed childcare center applicants and Charter Schools must attach a copy of current license or Charter and Certificate of Occupancy - label Attachment to Question 20 – Licensing.

**18. PROJECT LOCATION & SIZE**

Indicate the location and size of the project (e.g., square foot of building or expansion area).

**19. ZONING**

Specify the current zoning of the proposed site and the required zoning for the intended use. Indicate if your project will be in compliance with the current zoning, or if a variance, alley abandonment, etc., is necessary to carry out the project.

**20. PARKING**

Specify whether the current parking is adequate for the intended use, meets zoning requirements, or requires re-zoning or a variance.

**21. ARCHITECTURAL SERVICES**

Indicate what type of architectural services will be needed on the project. Indicate whether an architect assisted in developing the project budget, and provide the name of the firm. Indicate what design work (i.e., conceptual plans, and construction drawings) has been completed for the project.

**22. SITE CONTROL**

Specify how the site is firmly committed for the project. Indicate if the site is owned by your agency, leased or pending purchase by your agency. See instructions for more details.

**23. NEIGHBORHOOD PROJECT SUPPORT**

Is needed when the project will affect a specific neighborhood. Always needed for new construction projects. For other projects, check with staff.

Name of Neighborhood  
Association

Authorized Name

Signature

**24. PROJECT OUTCOMES / OBJECTIVES**

Define the project measurable outcomes and objectives. Be specific (see instructions for examples).

**25. TARGET POPULATION - NUMBER OF PERSONS TO BE SERVED**

Describe the client target population for the project, and specify the number of persons to be served by the project.

**26. MEETING A CDBG NATIONAL OBJECTIVE**

All proposals must either primarily benefit low/moderate income persons, or prevent or eliminate slum or blight. Please check the appropriate box that applies to your project.

**LOW INCOME**

☐

Client Based (means the clients you propose to serve have incomes less than 80% of median)

☐

Special Needs Population (appropriate when clients are abused children, adults, the elderly, homeless, or persons with disabilities)

☐

Area Based (where 51% of residents in area served have low/moderate income)

Please provide project boundaries

☐

**27. ADDITIONAL INFORMATION**

Please provide any additional information in the space below that you would like considered for this proposal.

## TRACK RECORD / CAPABILITY

### 28. AGENCY PERFORMANCE HISTORY

List the two (2) most recent City of Phoenix CDBG funded project/program sponsored by your agency. If your agency has never received Phoenix CDBG funding list other recent projects sponsored by your agency. Please list the project/programs funding source(s) and include the accomplishments. Attach funder letters that will support your response to this question (see instructions for additional information).

#### PROJECT 1- SPONSORED BY YOUR ORGANIZATION

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Fiscal Year: \_\_\_\_\_ Funding Amount: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Funding Source(s): \_\_\_\_\_

Use the space provided below to enter the results achieved by the project:

#### PROJECT 2 - SPONSORED BY YOUR ORGANIZATION

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Fiscal Year: \_\_\_\_\_ Funding Amount: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Funding Source(s): \_\_\_\_\_

Use the space provided below to enter the results achieved by the project:

# EXHIBIT A

## Acquisition/Construction/Rehabilitation Project Budget

### PROJECT TITLE

This schedule must be completed when the proposed capital project involves acquisition, construction and/or rehabilitation of a public facility. The project budget should include permits, utility installation, relocation and engineering and architectural services. City Department applicants must ensure the matching funds are already earmarked in their departmental budget and agree with this request. Exhibit B must be completed to document the project sources of matching funds and gap financing

Cost Component	MATCHING / FUNDS			Total Project Budget
	CDBG Funding Request	Other Cash Resources	In-kind Contributions	
<b>Land</b>				
Appraisals				
Legal Services				
Land Acquisition				
Real Estate Services				
Other (specify)				
_____ _____ _____ _____ _____				
<b>Total Land Cost</b>				
<b>Professional Services</b>				
Architects				
Contractual Engineering				
City Engineering				
Consultants				
Asbestos Survey				
Archaeological				
Monitoring				
Other (specify)				
_____ _____ _____ _____ _____ _____ _____				
<b>Total Professional Services</b>				
<b>Construction</b>				
Site Improvements				
Labor <sup>1</sup>				
Material				
Equipment <sup>2</sup>				
Fees and Permits <sup>3</sup>				
<b>Total Construction Costs</b>				
<b>Relocation Assistance</b> <sup>4</sup>				
_____				
<b>Total Project Budget</b>				

<sup>1</sup> Davis-Bacon Wage Regulations will affect Construction/Rehabilitation project costs. Check with staff for wage determination.

<sup>2</sup> Attach list itemizing proposed acquisition of built in equipment. Equipment that is not an integral structural fixture is generally not eligible for purchase with CDBG funds.

<sup>3</sup> Include costs for development and permit fees payable to the City of Phoenix in connection with the project.

<sup>4</sup> Relocation costs apply when individuals or businesses are displaced as result of your acquisition, new construction or renovation project. Please check with staff for relocation cost factors.

# EXHIBIT B

## Personnel Schedule

### (For CDBG Funded Public Service Salaries Only)

Public Facilities proposals are classified by either Geographic Priority Areas or Citywide (application Question 5). Projects that are improperly categorized will be moved to the appropriate classification. The level of matching funds and minimum amount of CDBG dollars to request for both classifications are as follows:

	Geographic Priority Areas	Citywide
<b>Matching Funds Required</b>	One to one match (1 CDBG dollar requested to 1 non-CDBG dollar to match)	One and one-half to one match (1 CDBG dollar requested to 1.5 non-CDBG dollar to match)
<b>Minimum Request Amount</b>	\$25,000 (\$50,000 minimum total project cost)	\$50,000 (\$125,000 minimum total project cost)

All non-CDBG project funds (match) require written verification submitted with the proposal. Proposals submitted with unverified match will be disqualified from consideration. The total of CDBG funds and non-CDBG funds must be adequate, as determined by City staff, to complete the entire project. Projects that are financially infeasible will not be considered for funding. Attach the letters of match/financial commitment to the proposal and label Attachments(s) Schedule B - Matching Funds. **Charter schools must also submit a copy of their annual financial report.**

To complete the following schedule, list the sources of the matching funds below and indicate whether they are firmly committed or tentative.

MATCHING & GAP FUNDS SOURCES					
Source	Cash Resources	Value In-kind Contribution	Firm Commitments (please check)	Tentative Commitments (Please check)	Date Available
	\$	\$			
	\$	\$			
	\$	\$			
	\$	\$			
	\$	\$			
<b>Total</b>	\$	\$			

These sources represent a match of \$ \_\_\_\_\_ To CDBG request of \$ \_\_\_\_\_